**Notice of Exempt** Offering of Securities

# ₩ashington, DC U.S. Securities and Exchange Commission

DEC 15 ZUUU

Washington, DC 20549

(See instructions beginning on page 5)

OMB Number: 3235-0076

Expires: December 31, 2008

Estimated average burden hours per response: 4.00

Intentional misstatements o  Item 1. Issuer's Identity	r omissions of fact const	itute federal criminal vio	lations. See	18 U.S.C. 1001.
Name of Issuer	Previous Name(s)	X None		Entity Type (Select one)
GENOLOGICS LIFE SCIENCES SOFTWARE	Trevious rigine(s)		——————————————————————————————————————	Corporation
Jurisdiction of Incorporation/Organization	<b>.</b>	POCESSED		Limited Partnership
CANADA (FEDERAL)		10050055		Limited Liability Company General Partnership
Year of Incorporation/Organization (Select one)  Over Five Years Ago Within Last Five Years (specify year)	OTH	DEC 24 ZULBY DIMSON REUTER	\$	Business Trust Other (Specify)
(If more than one issuer is filing this notice, check	this box 🔲 and identify	additional issuer(s) by a	ittaching Ite	ems 1 and 2 Continuation Page(s
Item 2. Principal Place of Business and	Contact Informat	ion		
Street Address 1		Street Address 2		
VANCOUVER ISLAND TECHNOLOGY PARK		SUITE 2302 - 4464 M	ARKHAM :	ST
City St.	ite/Province/Country	ZIP/Postal Code	Ph	one No.
VICTORIA	/CANADA	V8Z 7X8	25	0-483-7011
Item 3. Related Persons				
Last Name	First Name		Mi	ddle Name
BALL	MICHAEL			
Street Address 1		Street Address 2		
3125 WEALD ROAD				
City Stat	e/Province/Country	ZIP/Postal Code		
VICTORIA BC/	CANADA	V8R 6E2		
Relationship(s): X Executive Officer X D	irector Promoter			08070186
Clarification of Response (if Necessary)	IRECTOR		<del></del>	
(Identify a Item 4. Industry Group (Select one	dditional related person )		and attac	hing Item 3 Continuation Page(s
Agriculture     Banking and Financial Services	<u> </u>	Services	(	Construction
Commercial Banking	Energy Elect	ric Utilities		REITS & Finance Residential
Insurance	Ŭ Energ	gy Conservation		Residential Other Real Estate
Investing	Coal	Mining		letailing
Investment Banking	<u> </u>	onmental Services	_	lestaurants
Pooled Investment Fund	Oil &			echnology
If selecting this industry group, also select or type below and answer the question below:		r Energy	(	Computers
Hedge Fund	Health Ca	a <b>re</b> chnology	(	Telecommunications
Private Equity Fund	$\mathcal{L}$	h Insurance	(	Other Technology
Venture Capital Fund	O Hosp	itals & Physcians		ravel
Other Investment Fund		naceuticals		Airlines & Airports  Lodging & Conventions
Is the issuer registered as an investmer company under the Investment Comp.	any Other	r Health Care		Conventions Tourism & Travel Services
Act of 1940? Yes No	○ Manufac	-	(	Other Travel
Other Banking & Financial Services	Real Esta			⊃ Other

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Item 5. Issuer Size (Select one) Revenue Range (for issuer not specifying "hedge" Aggregate Net Asset Value Range (for issuer or "other investment" fund in Item 4 above) specifying "hedge" or "other investment" fund in Item 4 above) OR No Revenues No Aggregate Net Asset Value \$1 - \$1,000,000 \$1 - \$5,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$100,000,000 \$50,000,001 - \$100,000,000 Over \$100,000,000 Over \$100,000,000 Decline to Disclose Decline to Disclose Not Applicable Not Applicable Item 6. Federal Exemptions and Exclusions Claimed (Select all that apply) Investment Company Act Section 3(c) Rule 504(b)(1) (not (i), (ii) or (iii)) Section 3(c)(9) Section 3(c)(1) Rule 504(b)(1)(i) Section 3(c)(2) Section 3(c)(10) Rule 504(b)(1)(ii) Section 3(c)(3) Section 3(c)(11) Rule 504(b)(1)(iii) Section 3(c)(4) Section 3(c)(12) **Rule 505** Section 3(c)(5) Section 3(c)(13) Rule 506 X Section 3(c)(6) Section 3(c)(14) Securities Act Section 4(6) Section 3(c)(7) Item 7. Type of Filing Amendment New Notice OR Date of First Sale in this Offering: |22 OCTOBER 2008 First Sale Yet to Occur OR Item 8. Duration of Offering Does the issuer intend this offering to last more than one year? **⋉** Yes ☐ No Item 9. Type(s) of Securities Offered (Select all that apply) X Equity Pooled Investment Fund Interests **Tenant-in-Common Securities** Debt Mineral Property Securities Option, Warrant or Other Right to Acquire Other (Describe) **Another Security** Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security **Item 10. Business Combination Transaction** Is this offering being made in connection with a business combination ☐ Yes No IX transaction, such as a merger, acquisition or exchange offer? Clarification of Response (if Necessary)

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Item 11. Minimum Investment				<u> </u>
Minimum investment accepted from a	any outside investor \$	0		
Item 12. Sales Compensation		<del></del>		
Recipient		Recipient CRD Number		
N/A				☐ No CRD Number
Associated) Broker or Dealer	None	(Associated) Broker or Dea	aler CRD Nu	mber
		] [		No CRD Number
Street Address 1		Street Address 2		
City	State/Provinc	e/Country ZIP/Postal Cod	de	
States of Solicitation  All States				
AL AK AZ AR IL IN A KS	CACO	CT	☐ FL ☐ MI	GA HI DO
RI SC SD TN	NNUN ☐ TX ☐ UT ☐	]NY □ÑC □ND ]VT □VA □WA	□ OH	OK OR PA
			_	ning Item 12 Continuation Page(s)
Item 13. Offering and Sales A		_		
()7.410%	\$			
(a) Total Offering Amount			OR	✓ Indefinite
(b) Total Amount Sold	\$ 957,916.77			
(c) Total Remaining to be Sold (Subtract (a) from (b)) Clarification of Response (if Necessary)	\$		OR	X Indefinite
1ST OF TWO CLOSINGS FOR 1 TRAN INVESTORS. SECOND TRANCHE TAR				ROM ACCREDITED US
Item 14. Investors				
Check this box if securities in the of number of such non-accredited investor	fering have been or may be ors who already have invest	ed in the offering:	qualify as ac	credited investors, and enter the
Enter the total number of investors wh	no already have invested in	the offering: 16		
		<u> </u>		
Item 15. Sales Commissions a		-		
Provide separately the amounts of sale check the box next to the amount.	s commissions and finders'	fees expenses, if any. If an a	mount is no	ot known, provide an estimate and
		Sales Commissions \$ N/A		Estimate
Clarification of Response (if Necessary)		Finders' Fees \$ N/A		Estimate
		<del></del>		

number.

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Item 16. Use of Proceeds	
Provide the amount of the gross proceeds of the offering that has been or is used for payments to any of the persons required to be named as ex directors or promoters in response to Item 3 above. If the amount is unknestimate and check the box next to the amount.	ecutive officers, \$ U
Clarification of Response (if Necessary)	
Signature and Submission	
Please verify the information you have entered and review the Te	erms of Submission below before signing and submitting this notice.
Terms of Submission. In Submitting this notice, each ide	entified issuer is:
the State in which the issuer maintains its principal place of bus process, and agreeing that these persons may accept service or such service may be made by registered or certified mail, in any against the issuer in any place subject to the jurisdiction of the activity in connection with the offering of securities that is the sprovisions of: (i) the Securities Act of 1933, the Securities Exchance Company Act of 1940, or the Investment Advisers Act of 1940, or State in which the issuer maintains its principal place of business	C and the Securities Administrator or other legally designated officer of siness and any State in which this notice is filed, as its agents for service of its behalf, of any notice, process or pleading, and further agreeing that rederal or state action, administrative proceeding, or arbitration brought United States, if the action, proceeding or arbitration (a) arises out of any subject of this notice, and (b) is founded, directly or indirectly, upon the inge Act of 1934, the Trust Indenture Act of 1939, the investment or any rule or regulation under any of these statutes; or (ii) the laws of the
110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to requir "covered securities" for purposes of NSMIA, whether in all instances or routinely require offering materials under this undertaking or otherwis so under NSMIA's preservation of their anti-fraud authority.  Each identified issuer has read this notice, knows the contents t	onal Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, e information. As a result, if the securities that are the subject of this Form D are due to the nature of the offering that is the subject of this Form D, States cannot e and can require offering materials only to the extent NSMIA permits them to do o be true, and has duly caused this notice to be signed on its behalf by the attach Signature Continuation Pages for signatures of issuers identified
,,,	
Issuer(s)	Name of Signer
Genologicar Life Sciences Estware	Keith Spencer
Signature	Title
Leis 5	Secretary
Number of continuation pages attached:	Dec 12,2008

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB

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## **Item 3 Continuation Page**

Item 3. Related Persons (Continued)

Last Name	First Name		Middle Name
HNATIUK	STEVEN		PETER WILLIAM
Street Address 1		Street Address 2	
#301 - 1224 HAMILTON ST			
City St	ate/Province/Country	ZIP/Postal Code	
VANCOUVER B	C/CANADA	V6B 2S8	
Relationship(s): Executive Officer	Director Promoter		
Clarification of Response (if Necessary)			
Last Name	First Name		Middle Name
WAITE	CHARLES, JR.		]
Street Address 1		Street Address 2	J
11818 86TH AVENUE NE			
City Si	tate/Province/Country	ZIP/Postal Code	
KIRKLAND	/A/USA	98034	
Relationship(s): Executive Officer	Director Promoter	<u></u>	
Clarification of Response (if Necessary)			
Claim cation of hesponse (if Necessary)			
Last Name	First Name		Middle Name
PACELLA	MARIA		
Street Address 1		Street Address 2	
#210 - 750 WEST 12TH AVENUE			
	ate/Province/Country	ZiP/Postal Code	
VANCOUVER	C/CANADA	V5Z 0A3	
Relationship(s): Executive Officer	Director Promoter		
Clarification of Response (if Necessary)			
Last Name	First Name		Middle Name
LISTWIN			
Street Address 1	DON	Street Address 2	
3480 WOODSIDE ROAD		Street/iddress 2	
		ZIP/Postal Code	
	A/USA	94062	
		77002	
Relationship(s): Executive Officer	Director Promoter		
Clarification of Response (if Necessary)			
		(Copy and use add	ditional copies of this page as necessary.)

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## **Item 3 Continuation Page**

Last Name	First Name		Middle Name
DEGREEF	JAMES		
Street Address 1		Street Address 2	
2466 EPWORTH STREET			
City State/	/Province/Country	ZIP/Postal Code	
VICTORIA BC/C	ANADA		
Relationship(s): X Executive Officer Dir	ector Promoter		
Clarification of Response (if Necessary) VICE-PRI	ESIDENT, PRODUCT	MANAGEMENT	
Last Name	First Name		Middle Name
SPENCER	KEITH		
Street Address 1		Street Address 2	
2900 - 550 BURRARD STREET			
City State	/Province/Country	ZIP/Postal Code	
VANCOUVER BC/C	ANADA	V6C 0A3	
Relationship(s): X Executive Officer Dir	ector Promoter		
Clarification of Response (if Necessary) SECRETA	ARY		
JECKETY	310		
Look Name			
Last Name	First Name		Middle Name
FORD	First Name	Street Address 2	Middle Name
FORD Street Address 1	ı —	Street Address 2	Middle Name
FORD Street Address 1 2302 - 4464 MARKHAM STREET	PAUL		Middle Name
FORD Street Address 1 2302 - 4464 MARKHAM STREET City State.	PAUL /Province/Country	Street Address 2  ZIP/Postal Code	Middle Name
FORD Street Address 1 2302 - 4464 MARKHAM STREET City State. VICTORIA BC/C	PAUL /Province/Country ANADA		Middle Name
FORD Street Address 1 2302 - 4464 MARKHAM STREET City State. VICTORIA BC/C	PAUL /Province/Country		Middle Name
FORD  Street Address 1  2302 - 4464 MARKHAM STREET  City State.  VICTORIA BC/C  Relationship(s): X Executive Officer Directors	PAUL /Province/Country ANADA		Middle Name
FORD  Street Address 1  2302 - 4464 MARKHAM STREET  City State.  VICTORIA BC/C  Relationship(s): X Executive Officer Directors	PAUL /Province/Country ANADA ector Promoter		Middle Name
FORD  Street Address 1  2302 - 4464 MARKHAM STREET  City State.  VICTORIA BC/C  Relationship(s): X Executive Officer Directors	PAUL /Province/Country ANADA ector Promoter		Middle Name  Middle Name
FORD  Street Address 1  2302 - 4464 MARKHAM STREET  City State  VICTORIA BC/C  Relationship(s): X Executive Officer Dir  Clarification of Response (if Necessary) VICE-PR	PAUL  /Province/Country  ANADA  rector Promoter  ESIDENT, FINANCE		
FORD  Street Address 1  2302 - 4464 MARKHAM STREET  City State.  VICTORIA BC/C  Relationship(s): X Executive Officer Dir  Clarification of Response (if Necessary) VICE-PRI  Last Name	PAUL  /Province/Country  ANADA  rector Promoter  ESIDENT, FINANCE  First Name		
FORD  Street Address 1  2302 - 4464 MARKHAM STREET  City State.  VICTORIA BC/C  Relationship(s): Executive Officer Dir  Clarification of Response (if Necessary) VICE-PRI  Last Name  ROGERS	PAUL  /Province/Country  ANADA  rector Promoter  ESIDENT, FINANCE  First Name	ZIP/Postal Code	
FORD  Street Address 1  2302 - 4464 MARKHAM STREET  City State.  VICTORIA BC/C  Relationship(s): Executive Officer Dir  Clarification of Response (if Necessary) VICE-PRI  Last Name  ROGERS  Street Address 1  401 - 1489 Marine Drive	PAUL  /Province/Country  ANADA  rector Promoter  ESIDENT, FINANCE  First Name	ZIP/Postal Code	
Street Address 1  2302 - 4464 MARKHAM STREET  City State.  VICTORIA BC/C  Relationship(s): X Executive Officer Dir  Clarification of Response (if Necessary) VICE-PRI  Last Name  ROGERS  Street Address 1  401 - 1489 Marine Drive  City State.	PAUL  /Province/Country  ANADA  ector Promoter  ESIDENT, FINANCE  First Name  CHRIS	ZIP/Postal Code  Street Address 2	
Street Address 1  2302 - 4464 MARKHAM STREET  City State.  VICTORIA BC/C  Relationship(s): X Executive Officer Dir  Clarification of Response (if Necessary) VICE-PRI  Last Name  ROGERS  Street Address 1  401 - 1489 Marine Drive  City State.  West Vancouver BC/C	PAUL  /Province/Country  ANADA  rector Promoter  ESIDENT, FINANCE  First Name  CHRIS  /Province/Country	ZIP/Postal Code  Street Address 2  ZIP/Postal Code	
Street Address 1  2302 - 4464 MARKHAM STREET  City State.  VICTORIA BC/C  Relationship(s): X Executive Officer Dir  Clarification of Response (if Necessary) VICE-PRI  Last Name  ROGERS  Street Address 1  401 - 1489 Marine Drive  City State.  West Vancouver BC/C	PAUL  //Province/Country  ANADA  rector Promoter  ESIDENT, FINANCE  First Name  CHRIS  //Province/Country  ANADA  rector Promoter	ZIP/Postal Code  Street Address 2  ZIP/Postal Code  V7T 1B8	

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#### **Item 3 Continuation Page**

Item 3. Related Persons (Continued) Last Name First Name Middle Name SANEI SAL Street Address 2 Street Address 1 649 GRANROSE TERRACE City State/Province/Country ZIP/Postal Code VICTORIA BC/CANADA V9C 4M3 Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary) VICE-PRESIDENT, PRODUCTS Last Name Middle Name First Name Street Address 1 Street Address 2 State/Province/Country City ZIP/Postal Code Relationship(s): Executive Officer Director Promoter Clarification of Response (if Necessary) Last Name Middle Name First Name Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary) Last Name Middle Name First Name Street Address 1 Street Address 2 City ZIP/Postal Code State/Province/Country Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary)

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